DLN: 93493109004139 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable Consumer Federation of America □ Address change 52-0880625 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 1620 I Street NW No 200 E Telephone number ☐ Amended return ☐ Application pending (202) 387-6121 City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20006 G Gross receipts \$ 5,224,710 Name and address of principal officer H(a) Is this a group return for ☐Yes ☑No subordinates? 1620 I Street NW No 200 H(b) Are all subordinates Washington, DC 20006 ☐Yes ☐No ıncluded? **☑** 501(c)(3) ☐ 501(c)() **◄** (Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www consumerfed org L Year of formation 1968 M State of legal domicile NY Summary 1 Briefly describe the organization's mission or most significant activities CFA is a research, advocacy, education, and service organization Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 36 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 6 1 **6** Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year** Current Year 8 Contributions and grants (Part VIII, line 1h) . 2,666,549 2,104,386 Ravenua 649,863 727,598 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 103,116 112,093 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -12,367 -20,014 3,407,161 2,924,063 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 347,450 318,900 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,977,238 1,995,965 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . b Total fundraising expenses (Part IX, column (D), line 25) ▶37,297 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,551,086 1,332,104 3,875,774 3,646,969 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -468,613 -722,906 Net Assets or Fund Balances Beginning of Current Year **End of Year** 8,581,652 7,846,176 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 330,860 334,971 22 Net assets or fund balances Subtract line 21 from line 20 . 8,250,792 7,511,205 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-04-19 Signature of officer Sign Here Jack Gillis Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-04-18 P00639819 Paid self-employed Firm's name Rogers & Company PLLC Firm's EIN ► 58-2676261 Preparer Use Only Firm's address ▶ 8300 Boone Boulevard Suite 600 Phone no (703) 893-0300 Vienna, VA 22182 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (20	018)					Page 2
Pa	nt III	Statement of Pro	ogram Service	Accomplis	hments		
		Check if Schedule O	contains a respons	e or note to a	any line in this Part III		🗹
1	Briefly	describe the organiza	ation's mission				
						anizations that was established in 1	968 to advance the
cons	umer int	erest through researc	th, advocacy, and e	ducation Se	e Schedule O for contir	nuation	
	Did the	e organization undert	ake any significant	nrogram serv	uces during the year w	hich were not listed on	
_		_	, -				☐ Yes 🗹 No
		," describe these new					
3	Did the	e organization cease o	conducting, or mak	e significant o	changes in how it condi	ucts, any program	
	service	es [?]					🗌 Yes 🗹 No
	If "Yes	," describe these cha	nges on Schedule C)			
4	Section	be the organization's n 501(c)(3) and 501(o ses, and revenue, if a	c)(4) organizations	are required	to report the amount of	largest program services, as meas of grants and allocations to others,	ured by expenses the total
	(Code)	(Expenses \$	2.007.236	including grants of \$	295,000) (Revenue \$	727,598)
	•	ditional Data	.	_,,		, (,	, ,
4b	(Code)	(Expenses \$	986,987	including grants of \$	23,900) (Revenue \$)
	See Ad	ditional Data					
4c	(Code)	(Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services (De	scribe in Schedule	0)			
	(Exper			ng grants of	\$) (Revenue \$)
4e	Total	program service ex	penses ▶	2,994,2	23		
							Form 990 (2018)

Form 990 (2018) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete ۷۵٥ 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 Yes Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 No Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο R Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Nο 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 💆 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Νo 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? . . Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments 14b Nο valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to No 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Nο 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Yes Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο

20a

20b

21

Yes

Νo

Nο

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government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

rai	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
р.	Statements Describing Other IDS Filings and Tay Compliance			

10a

10b

11a

11b

12b

13b

13c

12a

13a

14a

14b

15

No

Nο

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a Initiation fees and capital contributions included on Part VIII, line 12 . . .

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to	lınes 🗸
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 36			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 36			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	

	organization's maining address. If res, provide the names and addresses in Schedule O	1 1		'10
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	ĺ
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	<u>'</u>		
17	List the States with which a copy of this Form 990 is required to be filed▶ NY			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	this	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	id H	lighe	st C	Compensated En	nployees	
ear • List all f compens	e this table for all persons require of the organization's current of ation Enter -0- in columns (D), (ficers, directors, E), and (F) if no	trustee	s (wl nsatı	neth on v	er ir vas į	ndıvıdu Daid	als (or organizations), re	gardless of amount	-
	of the organization's current key		•								
ho receive	organization's five current high ad reportable compensation (Box n and any related organizations										
f reportabl	of the organization's former office e compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	•'			·	•
rganızatıor	of the organization's former dire n, more than \$10,000 of reportab	le compensation	n from t	he or	gan	ızatı	on and	an	y related organization	ns	2
ompensate	s in the following order individua ed employees, and former such p	ersons	•								
_ Check	this box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	Γ
	(A) Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1000 MISC)	MISC)	related organizations
See Addition	al Data Table						Ŀ				
					l	1		l			

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)		ne b	n off or/ti	t che inles ficer	s pers and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	i trustee or	nal Trustee	loyee	onpensated		
See Additional Data Table						

1b Sub-Total				>		
c Total from continuation sheets to Pa	art VII. Section	Α		▶□		

503.283 d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 4 Yes No

27,487 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . 3 Νo

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

individual .

3

			- 1	.,,,
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization 2 If "Yes," complete Schedule J for such person		5	No
Se	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the or		ensatio	on
	(A) Name and business address	(B) Description of services	С	(C) Compensation

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year										
	(A) Name and business address	(B) Description of services	(C) Compensation								

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0 Form **990** (2018)

Part	VII											
		Check if Schedul	e O contains	a respo	onse or note to any	(his Part VIII (A) revenue	Re e	(B) lated or xempt unction	(C) Unrelated business revenue	6	(D) Revenue excluded from a under sections
	1	.a Federated campaig	ns	1a				re	evenue			512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1b	170,712							
Gra not		c Fundraising events		1c	60,640							
īš, - r Ar		d Related organizatio	ns	1d								
ila Sila		e Government grants (co	ontributions)	1e								
Sin's,		f All other contributions, and similar amounts n										
utic her		above	ot illeladea	1f	1,873,034							
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution in lines 1a - 1f \$	ons included									
on a		h Total. Add lines 1a	-1f	•	•		2,104,386					
ı					Business	Code						
hue	2	a Conferences				611710	6	99,223		,223		
₽.	ł	H onoraria				611710		27,813	27	,813		
MCe	•	Publications				511190		562		562		
Ser	(d		_								
Program Service Revenue		=										
Prog		f All other program se				27,598						
		JTotal. Add lines 2a-2 Investment income (ii			unterest and other	1						
		sımılar amounts) .		•	>	<u> </u>	112,09	3				112,093
		Income from investme		•	•							
	5	Royalties	(ı) Rea		▶ (II) Personal							
	6	a Gross rents				1						
		b Less rental expenses				1						
		Dantal was a second				-						
	'	c Rental income or (loss)										
	•	d Net rental income o]						
	7:	a Gross amount	(ı) Securit	ies	(II) Other	-						
		from sales of assets other	2,2	44,995								
		than inventory										
		b Less cost or other basis and	2,2	44,995								
		sales expenses C Gain or (loss)		0		1						
		d Net gain or (loss) .]						
Other Revenue	8	contributions reporte	60,640 ed on line 1c)	of								
leve		See Part IV, line 18 b Less direct expense		a b	31,700 55,652	-						
er F		c Net income or (loss)			ents	J	-23,95	2				-23,952
oth	9;	a Gross income from g See Part IV, line 19		es								
_		See Farry, inte 19		а	1							
		b Less direct expense		b]						
		c Net income or (loss) laGross sales of invent		activit	ies >	1						
		returns and allowand]							
		b Less cost of goods s	sold	a b		-						
		c Net income or (loss)				J						
		Miscellaneous			Business Code							
	1:	1a Other			900099	1	3,93	8				3,938
		h										
		b										
		с										
	١,	d All other revenue .										
	,	e Total. Add lines 11a	-11d		•		3,93	8				
	1:	2 Total revenue. See	Instructions				2,924,06		727,598		0	92,079
								-	, -			orm 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	318,900	318,900		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	173,174		173,174	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,517,837	1,336,923	162,011	18,903
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	71,944	60,501	10,590	853
9 Other employee benefits	98,947	75,625	22,230	1,092
10 Payroll taxes	134,063	100,743	31,880	1,440
11 Fees for services (non-employees)				
a Management				
b Legal	19,753	19,751	2	
c Accounting	37,026		37,026	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	180		180	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	450,627	428,194	21,509	924
12 Advertising and promotion				
13 Office expenses	89,557	56,801	24,762	7,994
14 Information technology	18,881	18,881		
15 Royalties				
16 Occupancy	214,372	174,211	37,693	2,468
17 Travel	161,861	95,466	64,981	1,414
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	237,425	216,631	19,254	1,540
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	33,027	26,835	5,812	380
23 Insurance	5,905	5,046	795	64
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Subscriptions/Publicat	63,135	59,715	3,195	225
_				
b Taxes	355		355	
С				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,646,969	2,994,223	615,449	37,297
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form **990** (2018)

Check here \blacktriangleright \Box if following SOP 98-2 (ASC 958-720)

Form 990 (2018)

			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	8,236,540	2	7,641,760
	3	Pledges and grants receivable, net	100,000	3	25,000
	4	Accounts receivable, net	105,760	4	73,932
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
ls.	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
ssets	7	Notes and loans receivable, net		7	
S	8	Inventories for sale or use		8	
Q	9	Prepaid expenses and deferred charges	19,721	9	18,880
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 235,614	1	·	

				L			
7	Notes and loans receivable, net					7	
8	Inventories for sale or use					8	
9	Prepaid expenses and deferred charges				19,721	9	
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	235	5,614			
ь	Less accumulated depreciation	10 b	149	9,010	119,631	10 c	
11	Investments—publicly traded securities .					11	
12	Investments—other securities See Part IV, line	11 .				12	
13	Investments—program-related See Part IV, line	11 .				13	
14	Intangible assets					14	
15	Other assets See Part IV, line 11	•				15	
16	Total assets.Add lines 1 through 15 (must equ	al line	34)		8,581,652	16	
	10a b 11 12 13 14	Part II of Schedule L	Part II of Schedule L	Part II of Schedule L	7 Notes and loans receivable, net	Part II of Schedule L Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Inventories for sale or use 19 Prepaid expenses and deferred charges 19,721 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D Less accumulated depreciation 10b 149,010 119,631 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 14 Intangible assets Other assets See Part IV, line 11	Part II of Schedule L 7 Notes and loans receivable, net

12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets.Add lines 1 through 15 (must equal line 34)	8,581,652	16	7,846,176
17	Accounts payable and accrued expenses	116,078	17	145,804
18	Grants payable		18	
19	Deferred revenue	29,500	19	26,570
20	Tax-exempt bond liabilities		20	

86,604

162,597

334,971

4,479,016

3,032,189

7,511,205

7,846,176

Form **990** (2018)

	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	8,581,652	16	7,846,176
	17	Accounts payable and accrued expenses	116,078	17	145,804
	18	Grants payable		18	
	19	Deferred revenue	29,500	19	26,570
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
oilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			

	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,581,652	16	7,846,176
	17	Accounts payable and accrued expenses	116,078	17	145,804
	18	Grants payable		18	
	19	Deferred revenue	29,500	19	26,570
	20	Tax-exempt bond liabilities		20	
Ś	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ilitie	21 22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>:</u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	

26,570

185,282

330.860

4,649,453

3,601,339

8,250,792

8,581,652

25

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27

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31 32

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34

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

26

27

28

29

30

31

32

33

34

Assets or Fund Balances

Net

3b

Form 990 (2018)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version:

EIN: 52-0880625

Name: Consumer Federation of America

Form 990 (2018)

Farma 000 Bank III Lina

for consumer information and education efforts See Schedule O for continuation

Form 990, Part III, Line 4a:

CFA Programs- CFA Programs advance the consumer interest through research, advocacy, and education. Education - CFA disseminates information on consumer issues to the public and the media as well as to policymakers and other public interest advocates. This is achieved by national social marketing campaigns, national education information and distribution, conferences, reports, news releases and by website. Research - CFA investigates consumer issues, behaviors and attitudes using surveys, polling, focus groups, and literature reviews. The findings assist consumer advocates and policymakers as well as individual consumers. This research also provides the basis

America Saves - America Saves is a campaign that motivates, encourages, and supports low- to moderate-income households to save money, reduce debt, and build wealth The research-based campaign uses the principles of behavioral economics and social marketing to change behavior. Non-profit, government, and corporate groups participate in America Saves nationally and through local, regional, and statewide campaigns around the country. America Saves encourages individuals to take the America

Saves pledge and organizations to promote savings year-round and during America Saves Week See Schedule O for continuation

Form 990, Part III, Line 4b:

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	ally hours	anu	a uii	ecic	<i>)</i> / (1	ustee		Organization	organizations	mom the	
	for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Marceline White President	1 00	х		×				0	0	0	
Larry Blanchard Secretary/Treasurer	1 00	х		х				0	0	0	
James E Blau Vice President	1 00	X		x				0	0	0	
David Butler	1 00	×		х				0	0	0	

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Secretary/Treasurer
James E Blau
Vice President
David Butler
Vice President

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Janet Domenitz

Vice President

Vice President

Vice President

Vice President

Vice President

Vice President

Charles E Snyder

Willard P Ogburn

Kenneth McEldowney

Katrınka Smith Sloan

Irene Leech

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) from the any hours

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organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

 	1 6,	1		 ,		′ !	(11)	(14) 2 (4 000		
	for related organizations below dotted line)	Individual trustee or director	astruttenat Trustani	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Ann Baddour Director	1 00	x					0	0	0	
George M Caan Director	1 00	х					0	0	0	
Greg Carlson Director	1 00	x					0	0	0	
Bill Cheney Director	1 00	×					0	0	0	
Melvin Coleman	1 00	×					0	0	0	

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Director
Bill Cheney
Director
Melvın Coleman

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Director

Cutler Dawson

Dorothy Garrick

Colin Hansen

Carrie R Hunt

Roger Johnson

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	l		recto		ustee)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Robert Krughoff Director	1 00	х						0	0	0	
Mike Landis Director	1 00	×						0	0	0	
Sarah Ludwig Director	1 00	х						0	0	0	
Dan McCurry Director	1 00	Х						0	0	0	
Ed Miorawinela	1 00										

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Director
Dan McCurry
Director
Ed Mierzwinski
Director

Susanna Montezemolo

Director

Director

Director

Director

Director

Bill Newton

Jim Nussle

Doug O'Brien

Delia Patterson

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation

and a director/trustee)

organization

44,045

123,902

124,334

110,001

organizations

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2,202

3,024

7,684

7,745

from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	for related	l						1 (11 3 (4 0 0 0	/14/ 0/4000	I	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
Abe Scarr Director	1 00	х						0	0	0	
Rosemary Shahan Director	1 00	×						0	0	0	
Kım Sponem Director	1 00	х						0	0	0	
Tracey Steiner	1 00										

Director		_ ^						
Kım Sponem Director	1 00	l					0	
	1.00							
Tracey Steiner	1 00	l _x					0	
Director								
Chris Studer	1 00							
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any hours

and Independent Contractors

Director

Director

Jack Gillis

Kalitha Williams

Steve Brobeck

Executive Director

Executive Director

Rachel Weintraub

Legislative Director

Director Investor Protection

Barbara Roper

and Independent Contractors (A) Name and Title

George Barany

America Saves Director

hours per week (list any hours for related organizations below dotted line)
40 00

(B)

Average

Position (do not check more 00

Institutio

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

employee

than one box, unless person is both an officer and a director/trustee)

Х

(D) Reportable compensation from the organization (W- 2/1099-MISC) 101,001

Reportable compensation from related organizations (W- 2/1099-MISC)

(E)

(F)

Estimated

amount of other

compensation

from the

organization and related

organizations

6,832

SCHEDU Form 990 90EZ)		Com	Public oplete if the o	a section	2018			
epartment of th	Service	_	► Go to	www.irs.gov/Forms	990 for the late	est information		Open to Public Inspection
lame of the onsumer Fede	organizat ration of Ame	i on rıca					Employer identific	cation number
Part I	Reason f	or Public (Charity Stat	us (All organization	s must comple	ete this part.) S	52-0880625 See instructions	
				e it is (For lines 1 thro				
1	A church, co	nvention of	churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2 🗆 🗡	A school des	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
3	A hospital o	r a cooperati	ve hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).	
	A medical re name, city,		nızatıon operat	ed in conjunction with	a hospital descr	ibed in section :	170(b)(1)(A)(iii). E	inter the hospital's
		tion operated i v). (Comple		t of a college or unive	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170
			,	governmental unit de	scribed in secti	on 170(b)(1)(A	ı)(v).	
			mally receives vi). (Complete	a substantial part of it Part II)	s support from a	a governmental u	ınıt or from the gener	al public described ii
· 🗆 /	A communit	y trust descr	ıbed ın sectio ı	170(b)(1)(A)(vi)	(Complete Part I	II)		
				escribed in 170(b)(1) ee instructions Enter				lege or university or
f	rom activiti nvestment	es related to income and i	its exempt fur inrelated busir	(1) more than 331/3% actions—subject to cer less taxable income (le amplete Part III)	tain exceptions,	and (2) no more	than 331/3% of its s	upport from gross
	•			d exclusively to test fo	r public safety	See section 509	(a)(4).	
r	nore public	y supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a	
י ו	Type I. A si organization	upporting org (s) the powe	ganization oper	ated, supervised, or coappoint or elect a majo	ontrolled by its s	supported organiz	zation(s), typically by	
r	nanagemer	t of the supp		pervised or controlled in ation vested in the sare and C.				
		-	-	supporting organizatio	•	•	, -	ated with, its
	Type III no unctionally	n-function integrated	ally integrate The organizatio	 d. A supporting organi n generally must satis rt IV, Sections A and 	zation operated fy a distribution	in connection wi requirement and	th its supported orgai	
	Check this b	ox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f Enter t	he number	of supported	organizations	integrated supporting	-			
			on about the su	upported organization((iii) Type of		anization listed	(v) Amount of	(vi) Amount of
` '	rganization organization in your governing document? mo		monetary support (see instructions)	other support (se instructions)				
					Yes	No		
tal								
	rk Doduct	ion Act Not	ice see the T	 nstructions for	I Cat No 1128!	5F !	 Schedule A (Form 9	90 or 990-E7) 201

Page 2

III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
Section A. Public Support										
Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
Gifts, grants, contributions, and membership fees received (Do not	4,291,242	2,852,113	3,534,076	2,666,549	2,104,386	15,448,366				

l	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	4,291,242	2,852,113	3,534,076	2,666,549	2,104,386	15,448,36
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	4,291,242	2,852,113	3,534,076	2,666,549	2,104,386	15,448,36
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,096,54
6	Public support. Subtract line 5 from line 4						9,351,82
	Section B. Total Support						
	Calendar year (or fiscal year beginning in)	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e)2018	(f)Total

	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,096,540
6	Public support. Subtract line 5 from line 4						9,351,826
_ :	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e)2018	(f)Total
7	Amounts from line 4	4,291,242	2,852,113	3,534,076	2,666,549	2,104,386	15,448,366
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,945	66,538	86,301	103,116	112,093	401,993
۵	Net income from unrelated business						

S	ection B. Total Support			•	•		
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e) 2018	(f)Total
7	Amounts from line 4	4,291,242	2,852,113	3,534,076	2,666,549	2,104,386	15,448,366
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,945	66,538	86,301	103,116	112,093	401,993
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
LO	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
1	Total support. Add lines 7 through						15,850,359

	(or fiscal year beginning in)									
7	Amounts from line 4	4,291,242	2,852,113	3,534,076	2,666,549	2	2,104,386	15,448,366		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,945	66,538	86,301	103,116		112,093	401,993		
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)									
1	Total support. Add lines 7 through 10							15,850,359		
2	Gross receipts from related activities,	etc (see instruction	ons)			12		3,518,141		
3	First five years. If the Form 990 is fo	or the organization	's first, second, th	ırd, fourth, or fıfth	n tax year as a sec	tion 501(c)(3) org	janization,		
	check this box and ${f stop}$ here $\dots\dots\dots\dots\dots$									
S	ection C. Computation of Public	C Support Perc	entage					_		
4	Public support percentage for 2018 (lin	ne 6, column (f) di	vided by line 11,	column (f))		14		59 000 %		
5	Public support percentage for 2017 Sc		15		58 660 %					
	23.4/20/ support hart 2010. If the appropriate and part charly the hard on the 12 and the 14 a 23.4/20/ appropriate charly the hard									

	business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10							15,850,359
12	Gross receipts from related activities,	etc (see instruction	ons)			12		3,518,141
13	First five years. If the Form 990 is fo	r the organization	's first, second, t	hırd, fourth, or fıft	h tax year as a sectio	on 501((c)(3) org	janization,
	check this box and stop here						▶[
S	ection C. Computation of Public	Support Perc	entage					
14	Public support percentage for 2018 (lir	ne 6, column (f) di	ivided by line 11,	column (f))		14		59 000 %
15	Public support percentage for 2017 Sci	nedule A, Part II,	line 14			15		58 660 %
16a	33 1/3% support test—2018. If the	organization did i	not check the bo	x on line 13, and li	ne 14 is 33 1/3% or r	nore, c	heck this	box

3	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section	n 501(c)(3) organization,
	check this box and stop here		▶□
S	Section C. Computation of Public Support Percentage		
4	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	59 000 %
5	Public support percentage for 2017 Schedule A, Part II, line 14	15	58 660 %
6 a	$_{ m 3}$ 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or n	nore, c	heck this box
b	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	% or m	▶ ☑ nore, check this
.7a	box and stop here. The organization qualifies as a publicly supported organization a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, a is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly	. Expla	ain

ightharpoonsorganization 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly **▶**□

P	art III	Support Schedule for						
		(Complete only if you ch						under Part II. If
<u> </u>	ection A	the organization fails to Public Support	quality under t	ne tests listed i	below, please co	ompiete Part II.)	l	
30		alendar year		(1.) 2015	(-) 2016	(1) 2017	(-) 2010	(6) Tabal
	(or fiscal	year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1		nts, contributions, and nip fees received (Do not						
		y "unusual grants ")						
2		eipts from admissions,						
		ise sold or services						
		l, or facilities furnished in						
		ry that is related to the on's tax-exempt purpose						
3		eipts from activities that are						
		related trade or business						
_	under sect							
4		ues levied for the on's benefit and either paid						
		inded on its behalf						
5		of services or facilities						
		by a governmental unit to						
_		zation without charge						
6		d lines 1 through 5 ncluded on lines 1, 2, and						
/a		I from disqualified persons						
b		ncluded on lines 2 and 3						
		rom other than disqualified						
		nat exceed the greater of						
	\$5,000 or 13 for the	1% of the amount on line						
С	Add lines	•						
8		pport. (Subtract line 7c						
	from line (
Se		Total Support						
		alendar year year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	•	from line 6						
L0a		ome from interest,						
		, payments received on						
		loans, rents, royalties and						
ь		om similar sources I business taxable income						
U		non 511 taxes) from						
		es acquired after June 30,						
	1975							
		10a and 10b						
11		ne from unrelated business not included in line 10b,						
		or not the business is						
	regularly	carried on						
12		ome Do not include gain or						
		the sale of capital assets n Part VI)						
13		pport. (Add lines 9, 10c,						
	11, and 1	.2)	_					
14	First five	years. If the Form 990 is for	the organization	's fırst, second, th	ıırd, fourth, or fıft	h tax year as a sec	ction 501(c)(3	
		box and stop here						▶⊔
		Computation of Public Suport percentage for 2018 (lin			column (f))		1	
15		port percentage for 2018 (iii) port percentage from 2017 S		•	column (1))		15	
16			*	*			16	
		Computation of Investront income percentage for 201			line 13 column (f	1)	4-7	
17					mie 19, Column (T	//	17	
18		nt income percentage from 20	•	•	on line 14 1	0 15 is more the	18	d line 17 is n=+
		upport tests—2018. If the						_
		33 1/3%, check this box and s						▶ ∐
b		support tests—2017. If the	_			·		_
	not more	than 33 1/3%, check this box	and stop here.	The organization of	qualifies as a publ	icly supported orga	anızatıon	▶□
20	Private f	oundation. If the organization	n did not check a	box on line 14, 1	9a, or 19b, check	this box and see i	instructions	▶ 🗆

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

answer line 10b below

the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2018

Section A. All Supporting Organizations Yes

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509		

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

2 За Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below

4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document)

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI. 9b

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)				
	cupper unity or gamma units (community)		Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		\vdash		
u	governing body of a supported organization?	11a			
h	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations	110			
	ection b. Type I Supporting Organizations		Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or				
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	\sqcup		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting				
	organization				
S	ection C. Type II Supporting Organizations				
			Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
_	,, , , , , , , , , , , , , , , , , , , ,			<u> </u>	
	ection D. All Type III Supporting Organizations		Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	j			
		1	\vdash		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3			
S	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)			
	The organization satisfied the Activities Test Complete line 2 below	-			
	b				
	c	ınstru	ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.		\vdash		
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	26			

m -	
/I) See	
ıgh E	
(B) Current Year	
(optional)	

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

	Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in		
~		(A) Prior Year	

	instructions. All other Type III non-functionally integrated supporting organiza	tions i	must complete Sections A	through E
	Section A - Adjusted Net Income	(A) Prior Year	(B) C (o	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		

4 5

Add lines 1 through 3

Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

7

8

1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

6

(A) Prior Year

a Applied to underdistributions of prior years

b Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2018 Subtract

lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2019. Add lines

31 and 4c 8 Breakdown of line 7 a Excess from 2014.

Schedule A (Form 990 or 990-EZ) (2018)

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Additional Data

Software ID:

Software Version: **EIN:** 52-0880625

Name: Consumer Federation of America

Page 8

Schedule A (Form 990 or 990-EZ) 2018 Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1,

Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D. lines 5, 6, and 8, and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

Return Reference Explanation **SCHEDULE C**

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493109004139

Open to Public **Inspection**

Department of the Treasury lf

EZ)

(Form 990 or 990-

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

	al Revenue Service				
• S	ection 501(c)(3) organizations Col Section 501(c) (other than section s	n Form 990, Part IV, Line 3, or Form 9 mplete Parts I-A and B Do not complet 501(c)(3)) organizations Complete Part to Part I A column	te Part I-C		Activities), then
If the	Section 501(c)(3) organizations tha Section 501(c)(3) organizations tha	n Form 990, Part IV, Line 4, or Form 9 it have filed Form 5768 (election under s it have NOT filed Form 5768 (election u n Form 990, Part IV, Line 5 (Proxy Ta	section 501(h)) Country section 501(h	omplete Part II-A Do not co n)) Complete Part II-B Do	omplete Part II-B not complete Part II-A
	Section 501(c)(4), (5), or (6) organi				
	ne of the organization sumer Federation of America	·		Employer ide 52-0880625	ntification number
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is		zation.
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political ca	mpaign activities in	n Part IV (see instructions	for definition of
2	Political campaign activity expend	ditures (see instructions)		>	\$
3	Volunteer hours for political camp	paign activities (see instructions)			
Par	t I-B Complete if the orga	nization is exempt under section	on 501(c)(3).		
1	Enter the amount of any excise to	ax incurred by the organization under s	section 4955	>	\$
2	Enter the amount of any excise to	ax incurred by organization managers i	under section 4955	▶	\$
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for	this year?		☐ Yes ☐ No
4 a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the orga	nization is exempt under section	on 501(c), exce	ept section 501(c)(3)).
1	Enter the amount directly expend	ded by the filing organization for sectior	n 527 exempt funct	tion activities	\$
2	Enter the amount of the filing org function activities	ganization's funds contributed to other o	organizations for se	ection 527 exempt	\$
3	Total exempt function expenditur	res Add lines 1 and 2 Enter here and o	on Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file Fo	rm 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) o r each organization listed, enter the am that were promptly and directly deliver ee (PAC) If additional space is needed,	nount paid from the red to a separate p	e filing organization's funds political organization, such	Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
1					
					7

				enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 500845 Schedule C (Form 990 or 990-EZ) 2018

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
Grassroots nontaxable amount (enter 25% of line 1f	·)	83,781
Subtract line 1g from line 1a If zero or less, enter -	0	
Subtract line 1f from line 1c If zero or less, enter -C	 -	0
If there is an amount other than zero on either line	41 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five

> columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

> > (a) 2015

339,129

67,086

84,782

5,103

(b) 2016

345,231

69,212

86,308

8,500

(c) 2017

345,784

125,455

86,446

3,281

(d) 2018

335,122

128,592

83,781

68,395

Schedule C (Form 990 or 990-EZ) 2018

(e) Total

1,365,266

2,047,899

390,345

341,317

511,976

85,279

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

No

Yes

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

OMB No 1545-0047

DLN: 93493109004139

(Form 990)

	nal Revenue Service	► Go to <u>www.irs.q</u>	ov/Form990 for the latest info	rmation.		Ins	spection
	ame of the organ				Employer ide	entification	number
Co	nsumer Federation of	America			52-0880625		
P		zations Maintaining Donor Advis			Accounts.		
	Complet	te if the organization answered "Ye			(1-)[]		
1	Total number at	and of year	(a) Donor advised funds	i	(b)Fund	s and other a	accounts
2	Total number at	of contributions to (during year)					
3		of grants from (during year)					
4	Aggregate value	` ' ' '					
5		ition inform all donors and donor advisor	re in writing that the accets held in	a donor advi	iced funds are	the	
3		roperty, subject to the organization's ex		Tuonor auvi	iseu iulius ale		Yes 🗌 No
6		ition inform all grantees, donors, and do ses and not for the benefit of the donor				r	Yes 🗌 No
Pa	ort III Conser	vation Easements. Complete if th	e organization answered "Yes	" on Form	990, Part IV	', lıne 7.	
1	Purpose(s) of co	nservation easements held by the organ	nization (check all that apply)				
	☐ Preservation	on of land for public use (e g , recreation	or education) 🔲 Preserva	ation of an h	istorically imp	ortant land a	area
	Protection	of natural habitat	☐ Preserva	ation of a cei	rtıfıed hıstorıc	structure	
	☐ Preservation	on of open space					
2		2a through 2d if the organization held a e last day of the tax year	qualified conservation contribution	n in the form		ation at the End o	of the Year
а	Total number of	conservation easements		:	2a		
b	Total acreage re	stricted by conservation easements		- :	2b		
С	Number of conse	ervation easements on a certified historic	structure included in (a)		2c		
d		ervation easements included in (c) acqui n the National Register	red after 7/25/06, and not on a hi	storic	2d		
3	Number of const tax year ►	ervation easements modified, transferre	d, released, extinguished, or term	inated by th	ne organizatior	n during the	
4	Number of state	s where property subject to conservatio	n easement is located 🕨				
5	Does the organi and enforcemen	zation have a written policy regarding th t of the conservation easements it holds	e periodic monitoring, inspection, ?	handling of	violations,	☐ Yes	□ No
6	Staff and volunt	eer hours devoted to monitoring, inspec	ting, handling of violations, and er	nforcing con	servation ease	ements durin	ng the year
7	Amount of expe ▶ \$	nses incurred in monitoring, inspecting,	handling of violations, and enforci	ing conserva	ation easemen	ts during the	e year
8	Does each conse and section 170	ervation easement reported on line $2(d)(h)(4)(B)(II)^{2}$	above satisfy the requirements of	section 170	O(h)(4)(B)(ı)	☐ Yes	□ No
9	balance sheet, a	cribe how the organization reports cons ind include, if applicable, the text of the 's accounting for conservation easemen'	footnote to the organization's fina				
Pa	rt IIII Organi:	zations Maintaining Collections te if the organization answered "Ye	of Art, Historical Treasures		r Similar As	sets.	
1a	If the organizati art, historical tre	on elected, as permitted under SFAS 11 easures, or other similar assets held for XIII, the text of the footnote to its finan	6 (ASC 958), not to report in its republic exhibition, education, or res	evenue state search in fur			
b	historical treasu	on elected, as permitted under SFAS 11 res, or other similar assets held for publ its relating to these items					
	(i) Revenue ınclud	ed on Form 990, Part VIII, line 1			▶ \$		
((ii)Assets ıncluded	ın Form 990, Part X			▶ \$		

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining C	ollections of Art,	Histor	ical Tı	reasu	ires, or	Other	Similar As	ssets (continued)
3		g the organization's acquisition, access s (check all that apply)	ion, and other records	, check	any of	the fo	llowing th	at are a	significant i	use of it	s collection	n
а		Public exhibition		d		Loan	or excha	nge prog	rams			
b		Scholarly research		e		Other	r					
С		Preservation for future generations										
4	Provi Part)	de a description of the organization's o	collections and explain	how the	ey furth	ner the	e organiza	ation's ex	empt purpo	se in		
5		ng the year, did the organization solicit is to be sold to raise funds rather than							ılar	□ Ye	es 🗆	No
Pa	rt IV	Escrow and Custodial Arrang Complete if the organization an X, line 21.		rm 990), Part	IV, lı	ne 9, or	reporte	d an amou	unt on '	Form 990), Part
1a		e organization an agent, trustee, custo ded on Form 990, Part X?	dian or other intermed	diary for	contril	bution	s or othe	assets ı	not	□ Y €	es 🗌	No
b	If "Y∈	es," explain the arrangement in Part X	III and complete the fo	ollowing	table		Γ		A	mount		
С	Begir	nning balance	·	-			Ī	1c				
d	Addıt	ions during the year					Ī	1d				
е	Distri	ibutions during the year					Γ	1e				
f	Endır	ng balance					Γ	1f				_
2 a	Dıd tl	he organization include an amount on	Form 990, Part X, line	21, for	escrow	or cu	stodial ad	count lia	ıbılıty?		es 🗆	No
b	If "Ye	es," explain the arrangement in Part X	III Check here if the e	xplanat	ion has	been	provided	ın Part)	(III			
Pa	art V	Endowment Funds. Complete	ıf the organization	answei	red "Y	es" or	n Form 9	90, Par	t IV, line 1	٥.		
			(a)Current year	(b)₽	rior yea	r	(c) Two ye	ars back	(d)Three year	ars back	(e)Four ye	ears back
	-	ning of year balance										
		butions										
		vestment earnings, gains, and losses										
		s or scholarships										
е		expenditures for facilities ograms										
f	Admını	istrative expenses										
g	End of	year balance										
2 a		de the estimated percentage of the cu d designated or quasi-endowment ▶	rrent year end balance	e (line 1	g, colu	mn (a))) held as					
b	Perm	anent endowment 🟲										
С	Temp	oorarily restricted endowment >										
	The p	percentages on lines 2a, 2b, and 2c sh	ould equal 100%									
3a		here endowment funds not in the poss nization by	ession of the organiza	tion tha	t are h	eld and	d adminis	stered fo	r the	_	Yes	S No
	(i) uı	nrelated organizations								_	a(i)	
b		related organizations es" on 3a(ii), are the related organizat		on Sche	 edule R	· ·					a(ii) 3b	+-
4	Desci	ribe in Part XIII the intended uses of t	he organization's endo	wment	funds						•	
Pa	rt VI	Land, Buildings, and Equipm			_							
	Descri	Complete if the organization an iption of property (a) Cost or (invest)	other basis (b) Cost	rm 990 or other					m 990, Pa epreciation		ne 10. (d) Book va	alue
	Land											
	Buildin	nas										
		nold improvements	+		-	76,518			27,134			49,384
		ment				79,224			42,004			37,220
	Other					79,872			79,872			0
		lines 1a through 1e (Column (d) must	equal Form 990, Part	X, colui		,	10(c)).		>			86,604

(a) Description of recently or consistency (b) (c) Next cent value (consistency) (cons	Part VII Investments—Other Securities. Complete if the of See Form 990, Part X, line 12.	organization an	swered "Yes" or	Form 990, Part IV, line 11b.
	(a) Description of security or category	Book	Cos	
10	(2) Closely-held equity interests	:: =		
(c) (d) (e) (e) (f) (f) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(A)			
(a) Decoration of most ensure firms 950, plant, i.e. of (0) facts of 12) Texts.// Competer of the organization answered Vest on Form 990, Plant IV, line 11c. See Form 990, Pla	(B)			
Fig.	(C)			
Fig.	(D)			
Complete of the organization answered Version Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete of the organization answered Version Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete of the organization answered Version Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete of the organization answered Version Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete of the organization answered Version Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete of the organization answered Version Form 990, Part X, line 15. Complete of the organizat	(E)			
(ii) Total. (Column (b) must equal from 990, Part X, call (B) line 12) Total. (Column (b) must equal from 990, Part X, call (B) line 12) (a) Description of mustiment (b) Blook value (c) Method of valuation Cost or end-of-year market value (d) Cost or end-of-year market value (e) Cost or end-of-year market value (f) Cost or end-of-year market value (g) Street	(F)			
Tests. (*Column* (p) moust equal Form 990, Part X, con (g) line 12.) Toursements—Program Related. Column* (p) moust equal Form 990, Part X, line 13.	(G)			
Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(H)			
Complete if the organization answered Yes' on Form 990, Part IX, line 113. (a) Description of investment (b) 3 ook value (c) Netheriod of valuation Cost or end -of-year market value (c) Netheriod of valuation (cost or end -of-year market value (c) Netheriod of valuation (cost or end -of-year market value (c) Netheriod of valuation (c) Nether		•		
Cost or end-of-year market value		m 990, Part IV,	line 11c. See Fo	orm 990, Part X, line 13.
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	162,597	
			organization's fina	

Part XI

2

1

2

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

38,971 2,923,883

3,702,441

55,652

180

3,646,789

3.646.969

С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	55,652		
е	Add lines 2a through 2d		 	2e	
2	Subtract line 3e from line 1			-	

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

-16.681

2a

2b

Subtract line **2e** from line **1** . Amounts included on Form 990, Part VIII, line 12, but not on line 1 180 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b Add lines **4a** and **4b** 4c C 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5

180 2,924,063 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

c Other (Describe in Part XIII) d Add lines 2a through 2d . . Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:

3 4 Investment expenses not included on Form 990, Part VIII, line 7b . . .

b

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

Supplemental Information

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Donated services and use of facilities

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

4a

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

2a 2b

2c

2d

Explanation

180

55,652

2e

3

4c

5

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID:

Software Version:

Name: Consumer Federation of America

EIN: 52-0880625

Supplemental Information

Return Reference Explanation

Part X, Line 2 Management has evaluated CFA's tax positions and has determined that CFA has taken no unce rtain tax positions that require either recognition or disclosure in the accompanying fina ncial statements

upplemental Information				
Return Reference	Explanation			
Part XI, Line 2d - Other Adjustments	Fundraising Events- Direct Expenses 55,652			

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Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	Fundraising Events- Direct Expenses 55,652

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SCHEDULE G
(Form 990 or 990-EZ)

As Filed Data
Supplemental Info

Department of the Treasury

Name of the organization

Internal Revenue Service

licensing

Supplemental Information Regarding Fundraising or Gaming Activities

Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

Go to www irs gov/Form990 for instructions and the latest information

2018

DLN: 93493109004139OMB No 1545-0047

Open to Public Inspection

Employer identification number

Cons	sumer Federation of America						52-0880625	
Pa	Fundraising Activi Form 990-EZ filers a	•	_		answered "Yes" on Fo	orm 990,	Part IV, line :	17.
1	Indicate whether the organiza	ition raised funds th	rough an	y of the fo	ollowing activities Check	all that ap	ply	
а	Mail solicitations			e	Solicitation of nor	n-governm	ent grants	
b	☐ Internet and email solicita	tions		f	Solicitation of gov	ernment g	rants	
С	Phone solicitations			g	Special fundraisin	g events		
d	☐ In-person solicitations							
2a b	Did the organization have a w or key employees listed in For If "Yes," list the ten highest p to be compensated at least \$5	m 990, Part VII) or aid individuals or er	entity in ntities (fu	connection	on with professional fund	raising ser	vices?	es
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundra cust con) Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or re	ount paid to stained by) ser listed in ol (i)	(vi) Amount paid to (or retained by) organization
1			Yes	No				
2								
3								
4								
5								
6								
7								
8								
9								
10								
Tota	al .			•				
3	List all states in which the organ	nization is registered	d or licen	sed to sol	ıcıt contributions or has l	been notifi	ed it is exempt	from registration or

Sche	dule G (Form 990 or 990-EZ) 2018					Page 3
11	Does the organization conduct gaming	activities with nonmemb	pers?		☐ Yes ☐ No	
12	Is the organization a grantor, beneficia formed to administer charitable gaming		or a member of a partnership or other entity		□Yes □No	
13	Indicate the percentage of gaming activ	vity conducted in				
а	The organization's facility			13a		%
b	An outside facility			13b		%
14	Enter the name and address of the pers	son who prepares the or	ganization's gaming/special events books and re	cords		
	Name ►					
	Address ►					
15a	Does the organization have a contract version revenue?	with a third party from v	vhom the organization receives gaming		☐ Yes ☐ No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		organization 🕨 \$ and th	e		
С	If "Yes," enter name and address of the	e third party				
	Name					
	Address ►					
16	Gaming manager information					
	Name ►					
	Gaming manager compensation ▶ \$		······			
	Description of services provided ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor			
17	Mandatory distributions					
а	Is the organization required under state retain the state gaming license?	e law to make charitable	e distributions from the gaming proceeds to		☐ Yes ☐ No	
b	Enter the amount of distributions required in the organization's own exempt activities.		ributed to other exempt organizations or spent \$ \$			
Pai			nations required by Part I, line 2b, columns pplicable. Also provide any additional infor			
	Return Reference		Explanation			

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493109004139 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Consumer Federation of America 52-0880625 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Grant requests are submitted in writing to CFA and include the dollar amount being requested, a brief background of the organization applying for funding, a description of the project for which the organization is seeking funds, and a copy of the organization's determination letter. Grants awarded support CFA's exempt purpose of

Schedule I (Form 990) 2018

(5) (6) (7)

research, advocacy and education

Part I, Line 2

Additional Data

Center for Economic Justice

Consumers for Auto Reliability

1701A S 2nd Street

and Safety Foundation

1107 9th Street Suite 625 Sacramento, CA 95814

Austin, TX 78704

74-2791395

95-3826782

Software ID: Software Version:

501(c)(3)

501(c)(3)

EIN: 52-0880625

Name: Consumer Federation of America

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or aovernment

10,000

195.000

0 N/A

O N/A

IN/A

N/A

Auto insurance

grant

grant

grassroots advocacy

Grassroot advocacy

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-2266235 501(c)(3) 20.000 O N/A IN/A Maryland Consumer Rights Fair access to auto Coalition Inc Insurance and fair treatment I MI

treatment LMI

2209 Marvland Ave Baltimore, MD 21218

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Billings, MT 59101

Montana Organizing Project 27-5517516 501(c)(3) 5.000 O N/A IN/A Fair access to auto 1109 N 23rd Street insurance and fair

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

 Veterans Education Success
 46-2070196
 501(c)(3)
 7,000
 0 N/A
 N/A
 Military family advocacy grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Bethesda, MD 20813

efile GRAPHIC	C print	- DO NOT PROCESS	As Filed Data -		DLN:	93493109004139
SCHEDULE (Form 990 or 99 EZ)	90-	Complete to pro Form 990 o	vide information for r 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific questi ide any additional information n 990 or 990-EZ. 90 for the latest information.	ons on	OMB No 1545-0047 2018 Open to Public Inspection
Name Bethelorgan Consumer Federation	of Americ				Employer identi 52-0880625	fication number
Return Reference	O, Sup	plemental Information	n 	Explanation		
Part III, Line of some post of of organization of Mission of organization organization of organization organiza	on, CFA s, investiganch are ndividua the organ on a varia ncies, sta o promot mportan umer issi rest advo rences, a on-line ni Services dividuals aves can nizations nnual coi	investigates consumer issue gative reports, economic and published in reports that a liconsumers. They provide a nization. As an advocacy orgety of issues before Congreate legislatures, and the course beneficial policies, oppose to consumers. As an educues to the public and news is possible to consumers. As an educues to the public and news is a newsletter, conferences, for ewsletter CFAnews Update. Conference, and Food Policies and organizations. Our principality of the public focus on CF inferences, our State and Lond our annual Awards Dinners.	es, behavior, and attiticallysis, and policy ana sist consumer advocan important basis for ganization, CFA works, st. the White House, into We communicate to harmful ones, and elation organization, CF media, as well as to preports, books, brochiorums, and this websit, three annual confere y Conference As a sicipal service to individual to member groups, in cal Resource Center,	mization As a research organization destrough surveys, focus grouplysis. The findings of such restrates and policymakers as well as the policy positions and work of sito advance pro-consumer policifederal and state regulatory age and work with public officials to insure a balance debate on issue FA disseminates information on colicymakers and other public integres, news releases, press confette Of special importance are the ences Consumer Assembly, Final service organization, CFA assists duals is through the America Sinaged since then Our services to cludes CFAnews Update, our throur Consumer Cooperative Advitinguished public, consumer, and	up s les es cons e ncial s in o orga ee a isory	

Return Reference	Explanation
Form 990,	Advocacy - CFA works to advance pro-consumer policy on a variety of issues before Congress

Part III, Line
4a, CFA
Programs
(continued)

, the White House, federal and state regulatory agencies, state legislatures, and the cour
ts CFA's staff works with public officials to promote beneficial policies and to ensure a
balanced debate on important consumer issues

-time work experience

Reference	Explanation
Form 990, Part III, Line 4b, America Saves (continued)	We provide free financial tools, savings services, advice, and resources that help America ns from every income level take the steps needed to take charge of their finances and mana ge money more effectively. By inspiring a strong savings ethic in people, we can improve the financial health of our schools and businesses, our communities, and our nation. Americally, a Saves also targets two populations with unique savings needs through. Military Saves Aicomponent of America Saves and a partner in the Department of Defense's Financial Readiness. Campaign, which seeks to motivate, support, and encourage military families to save money, reduce debt, and build wealth. America Saves for Young Workers A program to support and

motivate young workers to use direct deposit to save part of their pay through their first

Funlanation

Return Explanation

Form 990,
Part VI,
Section A,
line 6

CFA membership is limited to non-profit organizations that promote the consumer interest
CFA's over 250 members include about 100 state and local advocacy and education groups, ab
out 50 national advocacy and education groups, about 100 consumer cooperative groups (cred
it unions, rural electric, and other cooperatives), public power groups, and state and loc
al consumer protection agencies

Return Explanation
Reference

line 7a

Form 990,
Part VI,
Section A,
CFA membership entitles member organizations to elect the Board of Directors

Return Explanation
Reference

line 11b

Form 990,
Part VI,
Section B.

A draft of the 990 is reviewed by the organization prior to finalizing the return. The completed 990 form is available to Board members prior to filing.

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	Once a year Board Members and key employees are asked to disclose for the record any perce ived conflict of interest, in a signed written statement identifying to the best of their knowledge (1) any entity of which the director or key employee is an officer, director, t rustee, member, owner or employee with which CFA has a relationship, (2) any transaction in which CFA is a participant and in which the director or key employee might have a conflicting interest, and (3) any transactions your organization entered into with another Board Member or Board Member's organization. Copies of all such statements are provided to the chair of CFA's Board Exclusion of Conflicted Person From Decision-Making. The disinterest ed members of the Board, or in the absence of a Board meeting, the disinterested members of the Executive Committee of the Board, may determine whether the disclosed conflict is suich that the Board Member is excluded from decision-making related to or giving rise to the conflict. Any person who is found to be conflicted shall not be present or participate in Board or committee deliberations or vote on the matter from which the conflict arises. The conflicted person is prohibited from attempting to improperly influence the deliberation or voting on the matter. CFA Board members periodically review the conflict of interest policy and address specific questions when they arise

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 15a

CFA uses outside comparability data for review of Executive Director compensation and the current salary of the Executive Director is set by the Executive Committee of the Board of Directors

Return Explanation
Reference

line 19

Form 990,
Part VI,
Section C.

The organization's governing documents, conflict of interest policy, and financial stateme
nts are made available to the public upon request

Return Explanation
Reference

11g

Form 990, Consultants, contractors, and payroll fees Program service expenses 428,194 Management a nd general expenses 21,509 Fundraising expenses 924 Total expenses 450,627

Return Explanation

of the audit

Form 990,
Part XII, Line
2c, Oversight

The Organization's Executive Committee assumes responsibility for oversight of the audit o
f its financial statements. The process is consistent with previous years